Policy & Procedure (P& P)

Policy Title :		
Labeling of Blood Components Units		
Department	Index No.	Scope
Laboratory & Blood Bank	LAB-068	All Blood Bank Staff
Issue Date	Revision NO	Effective Date
1439/9/8	2	1440/07/23
Review Due Date	Related Standard NO.	Page Number#
1442/07/23	CBAHI (LB. 53)	Page 1 of 5

01. Policy:

01.1. The blood bank develops an initial labeling on each blood component unit after completion of the donor testing and not before the discard of unacceptable units.

02. Definition :

01.1. N/A

03. Purpose :

01.1. The objective of the blood component labeling is to reduce the danger of incompatible transfusions caused through human errors by presenting important information in a clear, logical and easily recognizable format.

04. Procedure :

04.1. **Material Required:**

04.1.1. The label model on Microsoft publisher

04.1.2. ZEBRA printer

04.1.3. Adhesive labels for all components

04.2. **Procedure**

04.2.1. After collection and processing whole blood and blood components, all the units remain in quarantine storage areas (Unscreened blood bank refrigerator, deep freezer and platelet incubator and agitator).

04.2.2. Once all the reports of blood group and TTI testing are ready, the blood bank staff place the bags

on a table in chronological order.

04.2.3. Segregate those which are found reactive for any TTI or found unsuitable for use and keep them in the area for disposal. Leave those found suitable for use on the bench for labeling.

04.2.4. On the computer choose the specific label model on Microsoft publisher for the specific blood component (PRBCs or Platelets or FFP or Cryoprecipitate) Write carefully the unit number, date of collection and expiry date and the Blood group and the phenotype on each label as per the grouping register records.

04.2.5. Date of collection and date of expiry is very important. The expiry date depends on the type of bag and component.

The day of blood collection is considered the day zero for calculating the expiry dates.

04.3. The initial labeling:

04.3.1. The initial labeling requirement include:

04.3.2. The identification of the collection facility: we are using the Letter Q to refer to Qunfudah General Hospital Blood Bank followed by the year (for example Q39) and the logo of the Qunfudah General Hospital.

04.3.3. The product names.

04.3.4. The unit number: for example, Q39-1520

04.3.5. The ABO-Rh

04.3.6. The collection date and time

04.3.7. The expiration date and time

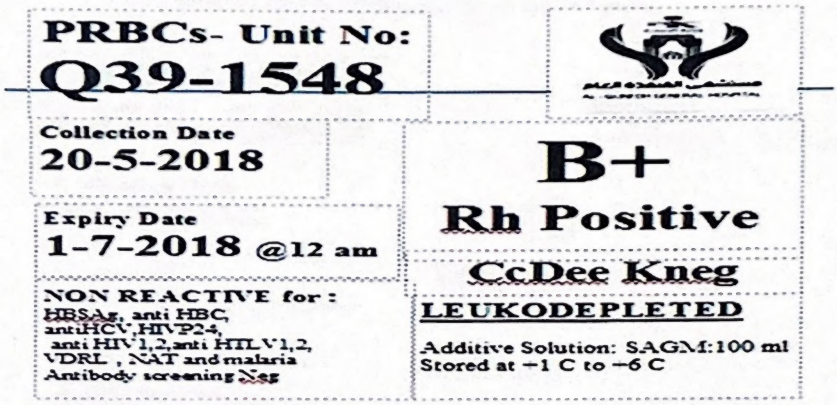
04.3.8. The mention that the unit is non-reactive for TTD (HBSAg, anti HBC, antiHCV, HIVP24, anti HIV1,2, anti HTLV1,2, VDRL, NAT and malaria)

04.3.9. The mention that the antibody screening is negative.

04.4. Initial labeling for PRBCs:

The blood bank staff will add:

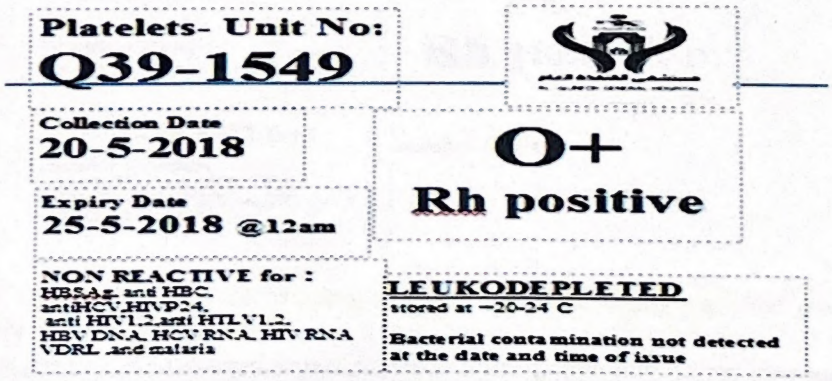
- The product name: PRBCs
- The phenotype Rh/Kell
- The mention that it is Leukodepleted
- If the unit is irradiated then the mention IRRADIATED will be added
- The blood bank staff will add the mention SICKLING TEST NAGATIVE for the unit prepared to the SCD patients.
- This is a sample for our labeling sticker on the PRBCs units:



04.4.1. **Initial labeling for the platelet's units:**

The initial labeling requirement include:

- The identification of the collection facility: we are using the Letter Q to refer to Qunfudah General Hospital Blood Bank followed by the year (for example Q39) and the logo of the Qunfudah General Hospital.
- The product name: Platelets concentrate or Platelets Apheresis
- The mention that it is Leukodepleted if it is leukodepleted
- The mention that Bacterial contamination was not detected at the date and time of issue
- This is a sample for our labeling sticker on the Platelets units:



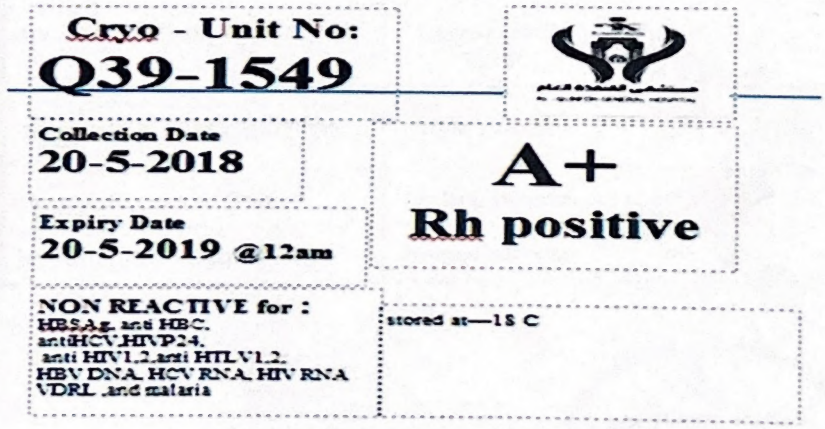
04.4.2. **Initial labeling for the fresh frozen plasma units:**

- The product name: FFP (fresh frozen plasma)

- This is a sample for our labeling sticker on the FFP units:

04.4.3. **Initial labeling for the cryoprecipitate units:**

- The product name: cryoprecipitate
- This is a sample for our labeling sticker on the cryoprecipitate units:



04.5. After the bags are labeled, a second technician double checks the number and blood groups on the bags tallying them with the records.

05. Responsibilities :

05.1. All Blood Bank Staff of Al-Qunfudah General Hospital.

06. Equipment & Forms

06.1. N/A

07. Attachment :

07.1. N/A

08. Reference

08.1. The Technical manual of the American Association of Blood Banks.

Preparation , Reviewing & Approval Box

	NAME	POSITION	SIGN & STAMP	DATE
Prepared By	Dr RAJA NACER SASSI	Head of Blood Bank		
Reviewed By	Mr. ABDULHADI ASHIRI	Lab &B.Bank HOD		
Document Reviewed By	Ms. SADIAH ALMAHMOUDI	TQM Director		١٢٢/٥/٢٠
Reviewed By	Dr. AGEEL ALGANIMI	Medical Director		
Approved By	Dr. ABDULLAH ALJABRI	Hospital Director		٩/٤٤٠/٧/١٧

Stamp Here

Ministry of Health وزارة الصحة
إدارة الجودة الشاملة
TQM

COLLECTION DAY -DAY 0-

COLLECTION DATE.....

PERFORMED AND ACCEPTABLE?	YES	NO	NIU
RECEPTION AND DONATION SECTION			
HEMOCUE QUALITY CONTROL			
BLOOD SCHAKER QUALITY CONTROL			
DONOR HISTORY QUESTIONNAIRES FILLED AND REVIEWED			
CRASH CART DAILY CHECK			
TRIMA DAILY MAINTENANCE			

COMMENTS:.....

.....

.....

I certify that I have reviewed all above records, listed all deficiencies and notified the supervisor.

Signature reception technician

signature donation technician

COLLECTION DAY -DAY 0-

COLLECTION DATE.....Components Separation date.....

PERFORMED AND ACCEPTABLE?	YES	NO	NIU
REVEOS DAILY CHECK			
REFRIGERATED CENTRIFUGE DAILY CHECK			
WELDER DAILY CHECK			
SEALER DAILY CHECK			
BALANCE DAILY CHECK			
ORTHOVISION DAILY QC			
TANGO INFINITY DAILY QC			
ID GEL CARD DAILY QC			

COMMENTS:.....

.....

.....

I certify that I have reviewed all above records, listed all deficiencies and notified the supervisor.

Signature separation technician

signature X-match technician

INVESTIGATIONS DAYS – DAYS 1/2-

Date:……

PERFORMED AND ACCEPTABLE?	YES	NO	NIU
DONOR ABO-RH GROUPING + PHENOTYPE+ ANTIBODY SCREENING RESULTS REVIEWED BY SENIOR			
DONOR BLOOD GROUPING FROM SEGMENTS REVIEWED BY SENIOR AND MATCHED WITH THOSE FROM SAMPLES			
DONOR MALARIA RESULTS AUTHORIZED BY SENIOR			
DONOR SEROLOGY + NAT RESULTS APPROVED AND RECEIVED FROM SEROLOGY DEPARTMENT			
OTHER TESTS : Du AND SICKLING TESTS			
PLATELETS BACTERIAL DETECTION			
DAILY VISUAL INSPECTION			

COMMENTS:……

……

I certify that I have reviewed all above records and are all acceptable .

I authorize the labeling and release of the blood components from this collection date.

Signature blood bank consultant Signature blood bank specialist

LABELS STICKERS

SERIAL NUMBERS FROM TO

RECORDS REVIEWED BY

LABELS STICKERS PRINTED BY

DOUBLE CHECKED BY

DATE